# Application for Involvement in a Special Event (Public involvement)

This form must be completed, where SLS Members are involved in any activity and identified as Surf Lifesavers, outside such **NORMAL Club/SLS carnival activity**. These events outside normal Club/SLS activity might be:

Endurance events, triathlons, marathons, displays, picnics (fun days) and all other events that include a water safety component.

* Please print clearly.
* Please attach additional information if space is not sufficient.
* Save the application as a new file once complete
* Send the form to your branch for approval, who will then send it onto SLSNSW.

## Event Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Event:** |  | | |
| **Date:** |  | **Start Time:** |  |
| **If over multiple days attach details for each day** | | **Finish Time:** |  |
| **Provide a detailed description of the event:** |  | | |
| **Location: (include details if multi-location event)** |  | | |
| **Are public roads to be used:** | *YES*  *NO*  *UNKNOWN* | | |
| **Has the event been held before?** | *YES  NO  UNKNOWN* | | |
| **Number of Persons Attending** |  | **Number of people participating or being serviced** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Order and Distance of Legs (if applicable)** | | | |
|  | |  | KM |
|  | |  | KM |
|  | |  | KM |
|  | |  | KM |
|  | |  | KM |
|  | |  | KM |
| **TOTAL EVENT DISTANCE** | |  | **KM** |
| ***General Description of Involvement with leg(s):*** |  | | |

## Details of Event Manager/Organisation

**NOTE:** *If the special event is being organized, for example a triathlon being run by ABC Pty Ltd, enter their details below.*

***SLSC OPERATED SPECIAL EVENT:***  ***YES*** ***NO***

***If a SLSC Operated Event, are any SLS Members receiving any remuneration or reward for their involvement:  YES NO***

***Is there a jumping castle planned as part of the event (this information is required for insurance purposes):***

***YES NO***

***If a SLSC Operated Event, has consideration been given for whether the event is considered to be of a “Commercial Nature”, for example in competition with an SLSNSW contracted service:  YES NO***

|  |  |
| --- | --- |
| **Event Manager or Organisation** |  |
| **Address:** |  |
| **Name of Contact:** |  |
| **Address:** |  |
| **Office Number:** |  |
| **Mobile Number:** |  |
| **Email Address:** |  |

## SLS Level of Involvement

|  |  |
| --- | --- |
| **Provide a detailed description of the level of SLSC involvement in the event: (*For example, if SLSC members are providing first aid, or water safety or advisory services)*** |  |

## Insurance

**NOTE:** For SLSC organised special events where members of the public are participating (i.e. an ocean swim open to members of the public) you **MUST** obtain Public Liability Insurance(PLI) for the event. Once the event has been approved by SLSNSW, this application will be sent onto the insurance company who will then approve or decline PLI cover and advise accordingly.

## SLS Club Details

|  |  |
| --- | --- |
| **Name of Club** |  |
| **Club Contact Person** |  |
| **Address:** |  |
| **Office Number:** |  |
| **Mobile Number:** |  |
| **Email Address:** |  |
| **Other Clubs Involved:** |  |

|  |  |
| --- | --- |
| **Water Safety (Person responsible at the event)** | |
| **Contact Person** |  |
| **Office Number:** |  |
| **Mobile Number:** |  |
| **Email Address:** |  |
| **Medical/First Aid (Person responsible at the event)** | |
| **Contact Person** |  |
| **Office Number:** |  |
| **Mobile Number:** |  |
| **Email Address:** |  |

## Number and Age Restrictions of Competitors/Attendees

|  |  |  |  |
| --- | --- | --- | --- |
| **Approximate Numbers** | | | |
| ***Competitors/Attendees*** | *SLSNSW Members ONLY* |  | |
|  | *Public* |  | |
|  | *Total (max) entries allowed* |  | |
| ***Age restrictions*** | *Minimum (years)* |  | |
|  | *Maximum (years)* |  | |
| **Total number of SLSNSW official/members involved in supporting the event** | | |  |

## Safety Equipment

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lifesaving Equipment Involved (*Please indicate number)*** | | | | |
| Helicopter Rescue Service | |  | Jet/RIB/Offshore Rescue Boat |  |
| First Aid Kits | |  | Rescue Boards |  |
| Surf Skis | |  | Vehicles |  |
| Radios | |  | IRB’s |  |
| Oxy-Viva Units | |  | ATV’s |  |
| Defibrillators | |  | RWC’s |  |
| Spinal Boards | |  | Other rescue equipment (specify) |  |
| ***Other Rescue Equipment:*** |  | | | |

## Number of Stations

|  |  |
| --- | --- |
| **Total Number of:** | |
| Stations manned by first aid personnel |  |
| Drink Stations |  |
| Other (please specify): |  |

## Other Non-SLSNSW Persons or Groups Involved

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Details of Group** | *Primary School* *Secondary School*  *Special Needs* *Community Group/Other (please specify)* | | | | |
| **Details of Other** |  | | | | |
| **Number group participants:** |  | | | | |
| **Special Requirements:** |  | | | | |
| **Details of Other Groups Involved:** | | | | | |
| **First Aid:** | |  | **No. of Persons:** | |  |
| **Safety Marshals:** | |  | **No. of Persons:** | |  |
| **Radio Communications** | |  | **No. of Persons:** | |  |
| **Other (**please specify**)** | |  | **No. of Persons:** | |  |
| **Are these persons covered by voluntary personal accident insurance?** | | | | *YES*  *NO*  *UNKNOWN* | |

## Notification/Permits/Permission

|  |  |  |
| --- | --- | --- |
| **Have you or the event organisers obtained permits or permissions from the relevant bodies; or notified them of the event? (**Include details where possible**)** | | |
| **NSW Police Force** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **Local Government/Council:** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **Roads and Maritime Services** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **NSW Ambulance Service** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **NSW Fire and Rescue** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **Local Hospital (A&E or Casualty Departments)** | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |
| **Other:** (Please specify) | | *YES*  *NO*  *NOT APPLICABLE* |
| **Details:** |  | |
| **If No, when?** |  | |

## Risk Management (Rate the Risk using the Matrices on the following pages)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Detail the risks and hazards that SLSNSW members maybe exposed to as well as what controls, management or mitigation strategies that you intend to implement (Contact SLSNSW State Office for Assistance)** | | | | | | | |
| **Risk or Hazard** | **Risk** | **Likelihood** | **Consequence** | **Rating** | **Suggested Control or Risk Mitigation** | **Person(s) Responsible** | **Due Date** |
| *Slip, Trip and Fall Hazard- objects in front of marquee entry* | *Serious injury to SLS member* | *Possible* | *Moderate* | *Medium 52* | *Members to be situational aware, remove any obstructions etc* | *All members* | *Date of Event* |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Consequence by**

**Risk**

**Insignificant**

**Minor**

**Moderate**

**Major**

**Catastrophic**

***Strategic***

No stakeholder or lack of public

interest, Minor, non-deliberate,

breach of procedure, contract

or regulatory obligations,

Little to no cost implications for

SLS, No or minimal impact on

the environment, No reporting

required.

Public and stakeholders

uninterested or undecided but

accepting of information/

decisions, Moderate, non-

deliberate, breach of

procedure, contract or

regulatory obligations, Minimal

site impact easily containable,

Environmental impact report is

required, Regulator imposing a

low statutory penalty, Low cost

implications for SLS.

Concerns expressed by

stakeholders and/or public at a

regional level and loss of trust

and confidence in operations on

a particular issue (non-life

threatening, Action results from

commercial loss (regulator

imposing a moderate statutory

penalty, moderate cost

implications able to be

absorbed by SLS, breach of

Contract, regulatory or common

law obligations that also

includes a deliberate breach of

a procedure, contract or

regulatory obligation,

moderate cost implications able

to be absorbed by the

organisation), Moderate,

temporary damage to habitat or

environment, May incur

cautionary notice or

infringement notice.

Concerns expressed by

stakeholders and/or public at a

national level by public and loss

of trust and confidence in

operations on a particular issue,

Actions resulting from an

impact on the public (the public

bringing legal action ;not a class

action, regulator imposing

maximum statutory penalty,

major cost implications that the

organisation will need to seek

additional funding to meet,

major breach of Contract,

regulatory or common law

obligations that impacts on a

individual / discrete

organisation of the community),

Long term or permanent

damage to habitat or

environment. Penalties or

compliance order incurred,

Prosecution for minor

infringements.

Sustained and widespread

concerns expressed by public

or stakeholders and/or

including all levels of

Government leading to a loss of

trust and confidence impacting

whole of operations, Actions

resulting from an impact on the

public (the public bringing class

action, major cost implications

unable to be met by SLS,

major breach of contract,

regulatory or common law

obligations that impacts on a

region of the community),

Substantial permanent damage

to habitat or environment,

Serious or repeated breach of

legislation or licence conditions,

Cancellation of licence,

Prosecution for serious

infringement

***Operations***

Injury requiring first aid, Minor

skills impact, Minor damage or

vandalism to asset, Minimal

impact on noncore business

operations. The impact can be

dealt with by routine

operations, corrective action

and training.

Injury or illness requiring

medical treatment or becomes

a Lost Time Injury, Minor

impact to capability, Minor

damage or loss <2.5% of total

assets, Some impact on

business areas in terms of

delays, systems quality but able

to be dealt with at operational

level , process modification and

skills development

Injury requiring hospitalisation

or an incident requiring

specialist medical treatment,

Unavailability of core skills

affecting services, Damage or

loss of <12.5% of total assets,

Impact on SLS resulting in

reduced performance such that

targets are not met. SLS's

existence is not threatened, but

could be subject to significant

review/change to operations.

Single fatality (outside flags),

multiple serious injuries,

Unavailability of critical skills of

personnel, Extensive damage or

loss <30% of total assets,

Breakdown of key activities

leading to reduction on

performance, Survival of the

project/activity or SLS is

threatened.

Single fatality (inside flags),

multiple fatalities Protracted

unavailability of critical

skills/people, Destruction or

complete loss of <50% of asset,

Critical failure(s) preventing

core activities from being

performed, The impact

threatens the survival of the

project or SLS.

***Financial (Gain or Loss)***

Minor impact on project budget

1% of project budget

1%-5% of project budget

5%-10% of project budget

Exceeds 10% of project budget

***Information***

Compromise of information

otherwise available in the public

domain

Minor compromise of

information sensitive to internal

departments or specific club

Compromise of information

sensitive to SLS's operations

Compromise of information

sensitive to SLS's interests

Compromise of information

significant ongoing impact

**Likelihood**

**Qualitative**

**Quantitative**

**Ratio**

Almost Certain

Is expected to occur in most

circumstances

Has occurred on an annual basis

in SLS in the past or the

circumstances are in train that

will cause it to happen

More than 1 per year

Likely

Will probably occur in most

circumstances

Has occurred in the last few

years in SLS or has occurred

recently in other similar

organisations or circumstances

have occurred that will cause it

to happen in the next few years

Once per year

Possible

Might occur at some time

Has occurred at least once in

the history of SLS or is

considered to have a 5% chance

of occurring in the next few

years

1 in 10 years

Unlikely

Could occur at some time

Has never occurred in SLS but

has occurred infrequently in

other similar organisations or is

considered to have a 1% chance

of occurring in the next few

years

1 in 50 years

Rare

May occur only in exceptional

circumstances

Is possible but has not occurred

to date in any similar

organisation and is considered

to have very much less than a

1% chance of occurring in the

short term

1 in 100 years

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Likelihood** | **Consequences** | | | | |
| **Insignificant** | **Minor** | **Moderate** | **Major** | **Catastrophic** |
| **Almost Certain** | ***Medium 40*** | ***High 48*** | ***Critical 72*** | ***Critical 84*** | ***Critical 100*** |
| **Likely** | ***Low 24*** | ***Medium 44*** | ***High 56*** | ***Critical 80*** | ***Critical 96*** |
| **Possible** | ***Low 12*** | ***Low 28*** | ***Medium 52*** | ***High 76*** | ***Critical 92*** |
| **Unlikely** | ***Low  8*** | ***Low 20*** | ***Low 36*** | ***Medium 64*** | ***High 88*** |
| **Rare** | ***Low 4*** | ***Low 16*** | ***Low 32*** | ***Low 60*** | ***Medium 68*** |

|  |  |  |
| --- | --- | --- |
| **Risk Level** | **Risk Acceptance/Tolerability** | **Strategic Action Plan/Risk Mitigation Strategy** |
| ***Low (4-60)*** | *Acceptable with periodic review* | Manage by routine procedure |
| ***Medium (40-68)*** | *Tolerable with periodic review* | Exposure to risk may continue provided it has been appropriately assessed, has been mitigated to "So Far As Reasonably Practicable", and is subject to periodic review to ensure that risk does not increase. It would be appropriate that measures to achieve long term further reduction to the risk be considered. |
| ***High (48-56)*** | *Tolerable with continual review* | Unnecessary exposure to the risk must be discontinued as soon as it is reasonably practicable and continued exposure would only be considered in exceptional circumstances. Risk controls must be applied as part of a documented risk management plan that is continuously reviewed. |
| ***High (76-88)*** | *Intolerable without treatment* | Exposure to risk should be discontinued to as soon as reasonably practicable. Risk controls must be applied as part of a documented risk management plan that is continuously monitored and reviewed. |
| ***Critical (72-100)*** | *Intolerable* | Exposure to this risk would normally be immediately discontinued except in extreme circumstances. The decision to tolerate risk must be made by the Senior Management Group, the CEO and the Board after being subjected to as much risk management rigour as practical, unless dire operational needs preclude so. |

## Special Conditions or Comments

|  |
| --- |
| **Detail any Additional Information or Comments** |
|  |

## Club Endorsement

|  |  |
| --- | --- |
| **Name:** |  |
| **Position:** |  |
| **Club:** |  |
| **Date:** |  |
| **Club Obligations:** | The club confirms that involvement in this special event will not adversely impact on any patrol or contractual obligations that exist for the club |
| **Signature:** |  |

## Branch Notification

|  |  |
| --- | --- |
| **Name:** |  |
| **Position:** |  |
| **Branch:** |  |
| **Date:** |  |
| **Signature:** |  |

## Special Event Permit Reference Number (Admin & Compliance Use Only)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name:** | |  | | | | | | | |
| **Position:** | |  | | | | | | | |
| **Department:** | |  | | | | | | | |
| **Date:** | |  | | | | | | | |
| **Signature:** | |  | | | | | | | |
| **Averaging out the risk rating using the completed risk assessment, detail the overall average risk rating** | | | | | |  | | | |
| **Special Event Application** | | | | | | | | | |
|  | ***APPLICATION APPROVED*** | |  | ***APPLICATION DENIED*** | | |  | | ***PENDING FURTHER INFORMATION*** |
| **Special Event Application Approval Number** | |  | | | **Date Approval Sent:** | | |  | |